FORM D

UNITED STATES

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OMB NUMBER:

OMB APPROVAL

3235-0076

	D EXCHANGE COMMISSION ington, D.C. 20549	Expires: Estimated average burder hours per response		
	FORM D			
NOTICE OF SALE ( RI SECT	SEC USE ONLY Prefix Serial			
UNIFORM LIMIT	TED OFFERING EXEMPTION	DATE	RECEIVED	
Name of Offering ( check if this is an amendment	and name has changed, and indicate change.)	<i>a</i> (	₹\$6` <u>`</u>	
Limited Partnership Interests		الم المناسبة		
Filing Under (Check box(es) that apply):  Type of Filing: • New Filing □ Amendment	Rule 504 □ Rule 505 ■ Rule 506 □ Section	4(6) □ ULOE	<b>1 8</b> 7008	
	A. BASIC IDENTIFICATION DAT		10	
1. Enter the information requested about the issuer		Washi	ngton, DC	
Name of Issuer (□ check if this is an amendment and	d name has changed, and indicate change.)		100	
Ptolemy III, L.P.				
Address of Executive Offices (Number and Str	reet, City, State, Zip Code)	Telephone Number (In		
c/o Xander Real Estate Partners III LLC, c/o Ma Ugland House, Grand Cayman, KY1-1104, Cayn				
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (lr	08055839	
Brief Description of Business:				
Real estate investments			•	
Type of Business Organization			Ž.	
□ corporation	■ limited partnership, afready formed	other (please specify):	()	
□ business trust	□ limited partnership, to be formed	PR(	OCESSED.	
	Month Year ization 06 08 Actual two-letter U.S. Postal Service abbreviation for State CN for Canada, EN for other foreign invisidiction		G 21 2008	

THOMSON REUTERS

## GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 USC 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires a payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA								
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ■ General and/or Managing Partner								
Full Name (Last name first, if individual)								
Xander Real Estate Partners III LLC								
Business or Residence Address	(Number and S	street, City, State, Zip Co	de)					
c/o Maples Corporate Services Limited,	PO Box 309, U			an Islands				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)								
Yog, Siddhartha								
Business or Residence Address	(Number and S	treet, City, State, Zip Co	de)					
c/o Maples Corporate Services Limited,	PO Box 309 II	oland House Grand Ca	vman KVI-1104 Cavm	an Islands				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)								
			•					
Business or Residence Address	(Number and S	treet, City, State, Zip Coo	la)					
Dusiness of Residence Address	(Ivamoer and S	ireet, City, Blate, Zip Coc	,					
Check Box(es) that Apply:	☐ Promoter	□ Beneficial Owner	□Executive Officer	□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)								
Business or Residence Address	(Number and S	treet, City, State, Zip Coo	le)					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)								
Business or Residence Address	(Number and S	treet, City, State, Zip Co	de)	<del> </del>	· · · · · · · · · · · · · · · · · · ·			
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Charle Day (and share Assault)			<del></del>					
Check Box(es) that Apply: Full Name (Last name first, if individual)	☐ Promoter	☐ Beneficial Owner	□ Executive Officer	□ Director	☐ General and/or Managing Partner			
run Name (Last name Hist, II Individual)								
				*****				
Business or Residence Address	(Number and S	Street, City, State, Zip Co	de)					
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)								
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)					
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Charle Bow(on) that Armbo				<del> </del>				
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	□ Executive Officer	□ Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)								
			,					
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING							
		Yes	No				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							
2	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?	s	N/A				
2.	what is the minimum investment that will be accepted from any individual?		Yes	No			
3.	Does the offering permit joint ownership of a single unit?			_			
4.							
Full Non	Name (Last name first, if individual) ne						
Busi	iness or Residence Address (Number and Street, City, State, Zip Code)						
Nam	ne of Associated Broker or Dealer						
State	es in which Person Listed Has Solicited or Intends to Solicit Purchasers						
	(Check "All States" or check individual States)	All S	tates				
_ [i	AL] _[AK] _[AZ] _(AR] _[CA] _[CO] _[CT] _[DE] _[DC] _[FL] _[GA] [IL] _[IN] _[IA] _[KS] _[KY] _[LA] _[ME] _[MD] _[MA] _[MI] _[MN] [MT] _[NE] _[NV] _[NH] _[NJ] _[NM] _[NY] _[NC] _[ND] _[OH] _[OK] [RI] _[SC] _[SD] _[TN] _[TX] _[UT] _[VT] _[VA] _[WA] _[WV] _[WI]	1] _ 1] _ 0] _ /) _	۸S]	_ [ID] _ [MO] _ [PA] _ [PR]			
Full	Full name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)							
Nam	ne of Associated Broker or Dealer						
State	es in which Person Listed Has Solicited or Intends to Solicit Purchasers						
	(Check "All States" or check individual States)	All S	tates				
_ [] _ []	AL] _[AK] _[AZ] _[AR] _[CA] _[CO] _[CT] _[DE] _[DC] _[FL] _[GA] [IL] _[IN] _[IA] _[KS] _[KY] _[LA] _[ME] _[MD] _[MA] _[MI] _[MN] [MT] _[NE] _[NV] _[NH] _[NJ] _[NM] _[NY] _[NC] _[ND] _[OH] _[OK] [RI] _[SC] _[SD] _[TN] _[TX] _[UT] _[VT] _[VA] _[WA] _[WV] _[WI]	[] - [] - [] - []	AS] DR]	_ [ID] _ [MO] _ [PA] _ [PR]			
Full	Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)							
Dashieu of Residence (Remiser and Street, Sity, Sait, Esp Scott)							
Name of Associated Broker or Dealer							
States in which Person Listed Has Solicited or Intends to Solicit Purchasers							
	All S	tates					
_ (! _ (!	AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [IL] [IN] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VT] [VA] [WA] [WV] [WI]	[] _ [] _ [] _ [] _	۷S]	_ (ID) _ [MO] _ [PA] _ [PR]			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box pand indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate Offering Price	Amount Already Sold
	Type of Security		
	Debt	<u> </u>	<b>s</b>
	Equity	s	<b>s</b>
	□ Common □ Preferred		- · · · · · · · · · · · · · · · · · · ·
	Convertible Securities (including warrants)	S	•
	Partnership Interests	\$ <u>360,000,000</u>	\$ \$ 0
	Other (Specify)	\$	<u>,                                     </u>
	Total		s 0
	Answer also in Appendix, Column 3, if filing under ULOE.	\$360,000,000	\$
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$ <u> </u>
	Non-accredited Investors	<del></del>	\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE		Ψ
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of Security	Dollar Amount Sold
	Type of offering		<b>S</b>
	Rule 505		<b>S</b>
	Regulation A		<b>-</b>
	Rule 504	•	\$
	Total		<b>S</b>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	О	<b>S</b>
	Printing and Engraving Costs	0	\$
	Legal Fees.	_	•
		ם	<b>4</b>
	Accounting Fees	<b>D</b>	•
	Engineering Fees		2
	Sales Commissions (specify finders' fees separately)	0	s
	Other Expenses (identify) including legal fees	•	\$762,500
	Total	•	\$ 762,500

b.	Enter the difference between the aggregate offering price given in response to Part C - Question
16	and total expenses furnished in response to Part C — Question 4(a). This difference is the
*3	fjusted gross proceeds to the issuer."

\$359,237,500

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

		Payments to Officers, Directors, & Affiliates		Paymenti To Others
Salaries and fees	۵	<b>S</b>	n	\$
Purchase of real estate	0	\$	O	S
Purchase, rental or leasing and installation of machinery and equipment	0	\$	0	\$
Construction or leasing of plant buildings and facilities	Đ	S	۵	\$
Acquisition of other business (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	0	·s	Ω Ω	s s
Working capital	۵	S	=	359,237,500
Other (specify):	0	\$ <u>.</u>	0	\$
	0	S	0	\$ \$ <u>359,237,</u> 500
Total Payments Listed (column totals added)		<b>m</b> s <u>35</u>	9,237	

### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (bX2) of Rule 502.

Issue: (Print or Type) Ptolemy III, L.P.	Signature			Date August 14,2008
Name of Signer (Print or Type) Siddhartha Yog	and the legge			



ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)